Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Cheryl First name  M. Middle name  Brown Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Cheryl Sims Cheryl Brown-Sims	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1167	

Del	btor 1 Cheryl M. Brown		Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5.	Where you live	88-36 204th Street	If Debtor 2 lives at a different address:		
		Hollis, NY 11423-2206	Number Street City State 9 71D Code		
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Queens County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	<ul> <li>Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</li> </ul>		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

	tor 1 Cheryl M. Brown				Case number	SI (II KIIOWII)
	Tell the Court About Y					
7.	The chapter of the Bankruptcy Code you are			of description of each, see <i>Notice F</i> o to the top of page 1 and check the		342(b) for Individuals Filing for Bankruptcy
	choosing to file under	☐ Cha	pter 7			
		☐ Cha	pter 11			
		☐ Cha	pter 12			
		■ Cha	pter 13			
8.	How you will pay the fee	<b>I</b>	will pay the e	ntire fee when I file my petition is	Please check with the cle	erk's office in your local court for more details
	<b>, ,,</b>	al	bout how you	may pay. Typically, if you are paying orney is submitting your payment of	g the fee yourself, you m	nay pay with cash, cashier's check, or money rney may pay with a credit card or check with
			need to pay t	ne fee in installments. If you choo	se this option, sign and a	attach the Application for Individuals to Pay
			3	n Installments (Official Form 103A)		Clina (a. Ohanta 7, Balanca inda
		bı	ut is not requi	ed to, waive your fee, and may do	so only if your income is	are filing for Chapter 7. By law, a judge may, less than 150% of the official poverty line tha
				amily size and you are unable to p to Have the Chapter 7 Filing Fee V		s). If you choose this option, you must fill out
			io rippiioalion	to riavo trio Oriaptor i r illing i co v	rantou (Omoiai i Omi 100	ob, and me it was year permen
9.	Have you filed for	■ No.				
	bankruptcy within the last 8 years?	☐ Yes.				
		<b>—</b> 100.	District	When		Case number
			District	When		Case number
			District	When		Case number
10.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District	When		Case number, if known
			Debtor			Relationship to you
			District	When		Case number, if known
11.	Do you rent your	■ No.	Go to line	12.		
	residence?	☐ Yes.	Has your	landlord obtained an eviction judgi	ment against you?	
				o. Go to line 12.		
			□ Y	es. Fill out <i>Initial Statement About</i> ankruptcy petition.	an Eviction Judgment Ag	gainst You (Form 101A) and file it with this

Deb	tor 1 Cheryl M. Brown				Case number (if known)			
Part	Report About Any Bu	sinesses	You Own	as a Sole Proprie	tor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
	buomeoo.	☐ Yes.	Yes. Name and location of business					
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any				
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, Stat	te & ZIP Code			
	it to this petition.		Checi	k the appropriate bo	x to describe your business:			
				Health Care Busir	ness (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))			
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?  If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following the following the following that it can deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following the following that it can deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following the following that it can deadlines. If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most recent balance she operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, following the federal income tax return or if any of these documents do not exist.			a small business debtor, you must attach your most recent balance sheet, statement of				
	For a definition of small	■ No.	I am r	ot filing under Chap	oter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code.	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am f	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Pari	4: Report if You Own or	Have Any	Hazardo	us Property or An	y Property That Needs Immediate Attention			
	Do you own or have any	■ No.			,			
	property that poses or is alleged to pose a threat	□ Yes.						
	of imminent and identifiable hazard to	ш тез.	What is	the hazard?				
	public health or safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?				
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	Where is the property?						
	-				Number, Street, City, State & Zip Code			

Debtor 1 Cheryl M. Brown Case number (if known)

Part 5: Explain Your Efforts

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Cheryl M. Brown			Case number (if	known)		
Part	t 6: Answer These Quest	ions for Rep	orting Purposes				
	What kind of debts do you have?		Are your debts primarily consurn ndividual primarily for a personal,	mer debts? Consumer debts are defined family, or household purpose."	in 11 U.S.C. § 101(8) as "incurred by an		
			☐ No. Go to line 16b.	, , ,			
			Yes. Go to line 17.				
			you incurred to obtain s or investment.				
		[	☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c. S	State the type of debts you owe th	at are not consumer debts or business de	ebts		
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. Go	o to line 18.			
	Do you estimate that after any exempt property is excluded and			u estimate that after any exempt property e to distribute to unsecured creditors?	is excluded and administrative expenses		
	administrative expenses	[	□No				
	are paid that funds will be available for	[	☐Yes				
	distribution to unsecured creditors?						
18. How many Creditors do		<b>1</b> -49		□ 1,000-5,000	<b>2</b> 5,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000 ☐ 40,004,35,000	☐ 50,001-100,000 ☐ More than100,000		
		☐ 100-199 ☐ 200-999		10,001-25,000	□ More marroo,000		
19.	19. How much do you		,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		- \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
		. ,	1 - \$500,000 1 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>Δ</b> ψοσο,σο	T TIME				
20.	How much do you estimate your liabilities	□ \$0 - \$50		\$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	to be?		1 - \$100,000 1 - \$500,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			1 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion		
Part	t7: Sign Below						
For	you	I have exar	nined this petition, and I declare u	under penalty of perjury that the information	on provided is true and correct.		
				n aware that I may proceed, if eligible, undayailable under each chapter, and I choos			
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571.					
		/s/ Cheryl Cheryl M.	M. Brown	Signature of Debtor 2			
		Signature of		Oignature of Debitor 2			
		Executed o		Executed on			
			MM / DD / YYYY	MM / D	D/YYYY		

Debtor 1 Cheryl M. Brown		Case	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have e	informed the debtor(s) about eligibility to proceed xplained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			rledge after an inquiry that the information in the
	/s/ DAVID I. PANKIN, ESQ. Signature of Attorney for Debtor	Date	January 23, 2018 MM / DD / YYYY
	DAVID I. PANKIN, ESQ. Printed name		
	David I. Pankin, P.C. Firm name		
	48 Willoughby Street Brooklyn, NY 11201-5202 Number, Street, City, State & ZIP Code		
	Contact phone <b>718-243-2444</b>	Email address	info@pankinlaw.com
	2762 Bar number & State		

Fill	in this inform	ation to identify your o	case:				
Deb	tor 1	Cheryl M. Brown					
Deb	tor 2	First Name	Middle Name	Last Name			
(Spot	use if, filing)	First Name	Middle Name	Last Name			
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT	OF NEW YORK			
Cas (if kno	e number					_	k if this is an ded filing
						amer	ded IIIIng
∩ff	icial Ear	m 106Sum					
			and Liabilities a	and Certain Statistical	Information		12/15
Be a	s complete ar	nd accurate as possib ut all of your schedule	le. If two married peopes first; then complete	ole are filing together, both are ed the information on this form. If y eck the box at the top of this page	qually responsible fo ou are filing amende	r supplyi	ng correct
Part	1: Summa	rize Your Assets					
						Your a	ssets of what you own
1.	Schedule A/I 1a. Copy line	<b>B: Property</b> (Official Fo 55, Total real estate, fr	orm 106A/B) om Schedule A/B			\$	281,830.50
	1b. Copy line	62, Total personal prop	perty, from Schedule A/E	В		\$	10,565.00
	1c. Copy line	63, Total of all property	on Schedule A/B			\$	292,395.50
Part	2: Summa	rize Your Liabilities					
							abilities It you owe
2.			aims Secured by Prope nn A, Amount of claim, a	rty (Official Form 106D) at the bottom of the last page of Pa	rt 1 of Schedule D	\$	360,547.56
3.			Unsecured Claims (Offic 1 (priority unsecured cla	cial Form 106E/F) ims) from line 6e of <i>Schedule E/F.</i> .		\$	0.00
	3b. Copy the	total claims from Part 2	2 (nonpriority unsecured	d claims) from line 6j of Schedule E	/F	\$	0.00
					Your total liabilities	\$	360,547.56
Part	3: Summa	rize Your Income and	Expenses				
4.		our Income (Official Fo					
				ıle I		\$	8,220.28
5.		Your Expenses (Official onthly expenses from lin				\$	5,197.45
Part	4: Answer	These Questions for	Administrative and Sta	atistical Records			
6.	•	• • •	er Chapters 7, 11, or 13 on this part of the form.	3? Check this box and submit this forr	m to the court with you	ur other sc	hedules.
7.	<ul><li>Yes</li><li>What kind of</li></ul>	debt do you have?					
				er debts are those "incurred by an in 8-9g for statistical purposes. 28 U.S		a personal	, family, or
		bts are not primarily of twith your other schedu		nave nothing to report on this part o	f the form. Check this	box and s	ubmit this form to
Offic	cial Form 106S	•		bilities and Certain Statistical Inf	ormation		page 1 of 2

Depto	Or 1 Cheryl M. Brown	Case number (If known)	
8 1	From the Statement of Your Current Monthly In	come: Copy your total current monthly income from Official Form	

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,059.52

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	I otal clali	1)
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Fill in this info	rmation to identify your case and t	his filin	a.			
Debtor 1	Cheryl M. Brown		9.			
		le Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name Midd	le Name	Last Name			
United States B	Sankruptcy Court for the: EASTERN	I DISTR	ICT OF NEW YORK			
Case number						Check if this is an
					Ц	amended filing
Official Fo	orm 106A/B					
Schedu	le A/B: Property					12/15
information. If mo Answer every que Part 1: Describe	ore space is needed, attach a separate sestion. e Each Residence, Building, Land, or O	sheet to to	o married people are filing together, both are eather form. On the top of any additional pages,			
Do you own or	r have any legal or equitable interest in	any resid	dence, building, land, or similar property?			
No. Go to Pa						
Yes. Where	e is the property?					
1.1		Wha	t is the property? Check all that apply			
88-36 20	4th Street	_	Single-family home	Do not deduct sec	ured claims	or exemptions. Put
Street address	s, if available, or other description		Duplex or multi-unit building	the amount of any secured claims on Scheo Creditors Who Have Claims Secured by Pro		
			Condominium or cooperative			
			Manufactured or mobile home	Current value of t	he Cı	urrent value of the
Hollis	NY 11423-2206	_	•	entire property? \$563.661	•	ortion you own? \$281,830.50
City	State ZIP Code			,		· · · · ·
				(such as fee simp	ole, tenancy	ownership interest by the entireties, or
			has an interest in the property? Check one Debtor 1 only	a life estate), if kr Tenancy by th		t <b>v</b>
Queens			•			<u>,                                      </u>
County			Debtor 1 and Debtor 2 only	☐ Check if this	is commur	nity property
		Othe	At least one of the debtors and another	(see instructions	s)	,, ,
			er information you wish to add about this item erty identification number:	i, such as local		
2. Add the do	llar value of the portion you own fo	or all of	your entries from Part 1, including any	entries for		
			er here			\$281,830.50
Part 2: Describe	e Your Vehicles					
			any vehicles, whether they are registered Schedule G: Executory Contracts and Une.		any vehicl	es you own that
3. Cars, vans, t	trucks, tractors, sport utility vehicle	es, mot	orcycles			
■ No						
☐ Yes						

De	ebtor 1	Cheryl M. Br	own Case number	(if known)
			or homes, ATVs and other recreational vehicles, other vehicles, and accessor motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	ies
ı	■ No			
[	□Yes			
			the portion you own for all of your entries from Part 2, including any entries for Part 2. Write that number here	
Pa	rt 3: Des	scribe Your Perso	nal and Household Items	
	•	·	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	Example No		urnishings ces, furniture, linens, china, kitchenware	
	Yes.	Describe		
			Misc. household contents	\$2,500.00
				<u> </u>
	□ No	es: Televisions a	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners phones, cameras, media players, games	; music collections; electronic devices
			4 televisions, 1 cell phone	\$2,000.00
	Example  ■ No	bles of value es: Antiques and other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; sta ons, memorabilia, collectibles	ımp, coin, or baseball card collections;
	Example  No	ent for sports ares: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis	; canoes and kayaks; carpentry tools;
	■ No		s, shotguns, ammunition, and related equipment	
	□ No ´		othes, furs, leather coats, designer wear, shoes, accessories	
				1
			Misc. clothing	\$500.00
	□ No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches	s, gems, gold, silver
			Misc. jewelry	\$1,500.00
			initial joinery	<u> </u>

Official Form 106A/B

De	ebtor 1	Cheryl M. Brown		Case number (if known)	
13.		<b>m animals</b> /es: Dogs, cats, birds, ho	orses		
	■ No	oo. Dogo, oato, birdo, ric	51303		
	☐ Yes.	Describe			
14	Any oth	er nersonal and house	ahold items you d	lid not already list, including any health aids you did not list	
14.	■ No	ei personai and nouse	enola items you a	nu not already list, including any health alds you did not list	
		Give specific information	າ		
15	. Add th	e dollar value of all of	your entries fron	n Part 3, including any entries for pages you have attached	<b>*</b> 0 500 00
	for Pa	rt 3. Write that number	here		\$6,500.00
		cribe Your Financial Asse			
Do	you ow	n or have any legal or	equitable interest	t in any of the following?	Current value of the portion you own?
					Do not deduct secured
					claims or exemptions.
16.	Cash				
	□ No	es: Money you have in y	your wallet, in your	home, in a safe deposit box, and on hand when you file your petiti	on
				Cash	\$50.00
17.		<b>s of money</b> les: Checking, savings, o	or other financial a	ccounts; certificates of deposit; shares in credit unions, brokerage	houses, and other similar
	_ '			ints with the same institution, list each.	
	□ No			Institution name:	
	■ Yes				
		17.1	savings	Local 804 Federal Credit Union Account #: xx1932	\$4,000.00
					<b>4 1,000.00</b>
				Local 804 Federal Credit Union	
		17.2.	checking	Account #: xx1932	\$15.00
18.		mutual funds, or publi			
	_ ′	es: Bond funds, investm	nent accounts with	brokerage firms, money market accounts	
	■ No		Institution or issu	ier name:	
	⊔ Yes		matitution of 1330	or name.	
19.	Non-pu joint ve		l interests in inco	rporated and unincorporated businesses, including an interes	st in an LLC, partnership, and
	■ No	inture			
		Give specific information	n about them		
			ame of entity:	% of ownership:	
20.	Govern	ment and corporate bo	onds and other ne	egotiable and non-negotiable instruments	
	Negotia	ble instruments include	personal checks,	cashiers' checks, promissory notes, and money orders.	
	Non-ne No	goliable instruments are	e those you cannot	transfer to someone by signing or delivering them.	
		Give specific information	about them		
			suer name:		
24	Dot!ro	ont or nancier cos	nto		
∠1.		ent or pension accour	ແຮ		
	Examp	es: Interests in IRA, ER		), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
	Examp.  ■ No	es: Interests in IRA, ER		), 403(b), thrift savings accounts, or other pension or profit-sharing	plans
	■ No	ist each account separa	ISA, Keogh, 401(k	), 403(b), thrift savings accounts, or other pension or profit-sharing  Institution name:	plans

Debtor 1		Cheryl M. Brown			Case number (if known)				
						_			
22.	Your sh	hare of all unu		ave made so that you may repaid rent, public utilities		rom a company communications companie	es, or others		
				Instituti	on name or individual:				
23.	Annuiti ■ No	i <b>es</b> (A contrac	t for a periodic payn	nent of money to you, eithe	er for life or for a number of	of years)			
	☐ Yes		Issuer name and de	escription.					
24.			<b>ation IRA, in an acc</b> 1), 529A(b), and 529		program, or under a qu	ualified state tuition prog	ram.		
	☐ Yes		Institution name an	d description. Separately f	ile the records of any inte	rests.11 U.S.C. § 521(c):			
25.	■ No	•			thing listed in line 1), ar	nd rights or powers exerc	cisable for your benefit		
	☐ Yes.	Give specific	information about th	iem					
26.				e secrets, and other intelle sites, proceeds from royalti		ents			
	☐ Yes.	Give specific	information about th	iem					
27.	Examp  ■ No	ا Building و	•	censes, cooperative associ	ation holdings, liquor lice	nses, professional licenses	3		
	⊔ Yes.	Give specific	information about th	iem					
M	oney or p	property owe	d to you?				Current value of the portion you own?  Do not deduct secured claims or exemptions.		
28.		unds owed t	o you						
	■ No □ Yes. 0	Give specific	information about the	em, including whether you	already filed the returns a	and the tax years			
29.	■ No	oles: Past due	or lump sum alimon	y, spousal support, child s	upport, maintenance, divo	orce settlement, property so	ettlement		
30.	Examp  ■ No	oles: Unpaid w benefits;	unpaid loans you m	rance payments, disability ade to someone else	benefits, sick pay, vacati	on pay, workers' compens	ation, Social Security		
		Give specific							
31.		ts in insuran bles: Health, d	•	ance; health savings accou	unt (HSA); credit, homeov	wner's, or renter's insurance	e		
	☐ Yes. I	Name the ins	urance company of e Company n	each policy and list its valu lame:	e. Benefici	ary:	Surrender or refund value:		
32.	If you a			u from someone who has , expect proceeds from a lif		e currently entitled to receiv	ve property because		
		Give specific	information						

Debtor	Cheryl M. Brown		Case number (if known)	
	aims against third parties, whether or not you have filed a language of the camples: Accidents, employment disputes, insurance claims, or the camples of the camples of the camples of the cample of the camples of the		nd for payment	
-	es. Describe each claim			
34. <b>Ot</b> ł	ner contingent and unliquidated claims of every nature, inc	cluding counterclaims o	of the debtor and rights to	set off claims
ΠY	es. Describe each claim			
35. <b>An</b> ;	y financial assets you did not already list			
	No			
□ Y	es. Give specific information			
	dd the dollar value of all of your entries from Part 4, includ or Part 4. Write that number here		es you have attached	\$4,065.00
Part 5:	Describe Any Business-Related Property You Own or Have an In	terest In. List any real esta	te in Part 1.	
37. <b>Do</b> y	you own or have any legal or equitable interest in any business-rel	ated property?		
■ No	o. Go to Part 6.			
☐ Ye	es. Go to line 38.			
Part 6:	If you own or have an interest in farmland, list it in Part 1.			
_	you own or have any legal or equitable interest in any farr No. Go to Part 7.	n- or commercial fishing	g-related property?	
_				
Ц	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That Y	ou Did Not List Above		
Ex	you have other property of any kind you did not already li- kamples: Season tickets, country club membership	st?		
	No /es. Give specific information			
ш,	es. Give specific information			
54. <b>A</b>	dd the dollar value of all of your entries from Part 7. Write	that number here		\$0.00
<b>5</b>				
Part 8:	List the Totals of Each Part of this Form			
	art 1: Total real estate, line 2			\$281,830.50
	art 2: Total vehicles, line 5	\$0.00		
	art 3: Total personal and household items, line 15	\$6,500.00		
	art 4: Total financial assets, line 36	\$4,065.00		
	art 5: Total business-related property, line 45	\$0.00		
	art 6: Total farm- and fishing-related property, line 52	\$0.00		
61. <b>P</b>	art 7: Total other property not listed, line 54	+ \$0.00		
62. <b>T</b>	otal personal property. Add lines 56 through 61	\$10,565.00	Copy personal property t	otal <b>\$10,565.00</b>
63. <b>T</b>	otal of all property on Schedule A/B. Add line 55 + line 62			\$292 395 50

Ħ	II in this inform	nation to identify your cas	se:									
	ebtor 1	Cheryl M. Brown										
_		First Name	Middle Name	L	ast Name							
	ebtor 2 oouse if, filing)	First Name	Middle Name	L	ast Name							
Ur	nited States Bar	nkruptcy Court for the: E	ASTERN DISTRICT OF NE	EW Y	ORK							
Ca	ase number											
	known)					☐ Check if this is an amended filing						
$\cap$	fficial Fo	rm 106C										
			erty You Cla	im	as Exempt	4/16						
the nee	property you list eded, fill out and se number (if kn	sted on <i>Schedule A/B: Prop</i> d attach to this page as man nown).	perty (Official Form 106A/B) ny copies of <i>Part 2: Additior</i>	as yo nal Pa	our source, list the property that you ge as necessary. On the top of any	additional pages, write your name ar						
spe any fun exe	ecific dollar any y applicable st nds—may be u emption to a pa	nount as exempt. Alternat atutory limit. Some exem nlimited in dollar amount.	ively, you may claim the fotions—such as those for . However, if you claim an	ull fai healt exen	ir market value of the property be th aids, rights to receive certain b option of 100% of fair market valu	One way of doing so is to state a ing exempted up to the amount of penefits, and tax-exempt retirement the under a law that limits the t, your exemption would be limited						
Pa	art 1: Identif	y the Property You Claim	as Exempt									
1.	Which set of	hich set of exemptions are you claiming? Check one only, even if your spouse is filing with you.										
	■ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)											
	☐ You are cla	aiming federal exemptions.	11 U.S.C. § 522(b)(2)									
2.	For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.											
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own			Specific laws that allow exemption						
			Copy the value from Schedule A/B	Check only one box for each exemption.								
		Street Hollis, NY Queens County	\$281,830.50		\$101,556.72	NYCPLR § 5206						
		nedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit							
		ehold contents	\$2,500.00		\$2,500.00	NYCPLR § 5205(a)(5)						
	Ellic Holli Gar	icadic A/D. <b>V.1</b>			100% of fair market value, up to any applicable statutory limit							
		ns, 1 cell phone medule A/B: 7.1	\$2,000.00		\$2,000.00	NYCPLR § 5205(a)(5)						
	Line from Ger	icadic AVD.			100% of fair market value, up to any applicable statutory limit							
	Misc. clothi	ing nedule A/B: <b>11.1</b>	\$500.00		\$500.00	NYCPLR § 5205(a)(5)						
	LING HOTH SCI	100a10 77D. 11.1			100% of fair market value, up to any applicable statutory limit							
	Misc. jewel	ry nedule A/B: <b>12.1</b>	\$1,500.00		\$1,500.00	NYCPLR § 5205(a)(6)						
	Line nom Scr	icuule AVD. 14.1			100% of fair market value, up to any applicable statutory limit							

Official Form 106C

Deb	otor 1 Cheryl M. Brown		Case number (if known)		
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Check only one box for each exemption.		
	Cash Line from Schedule A/B: 16.1	\$50.00	\$50.00	NYCPLR § 5205(a)(9)	
	Elle Holli Schedule PAB. 10.1		☐ 100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			nt.)	
	<ul><li>☐ Yes. Did you acquire the property cove</li><li>☐ No</li><li>☐ Yes</li></ul>	ered by the exemption wi	hin 1,215 days before you filed this case	?	

Fill	in this inform	ation to identify you	r case:				
Deb	tor 1	Cheryl M. Brown					
		First Name	Middle Name	Last Name			
	tor 2 use if, filing)	First Name	Middle Name	Last Name			
1 1 14	ad Ctataa Daw	l	EASTERN DISTRICT OF NEV	N VODK			
Unit	ed States Ban	kruptcy Court for the:	EASTERN DISTRICT OF NEV	WIORK			
Cas	e number						
(if kno	own)					_	if this is an
						ameno	led filing
Offi	cial Form	106D					
			Who Have Claims	Secure	d by Property	V	12/15
<u> </u>	iledule i	D. Creditors	WITO Have Claims	<u> </u>	d by Fropert	у	12/13
is nee			f two married people are filing toget out, number the entries, and attach i				
1. Do	any creditors h	nave claims secured by	your property?				
	☐ No. Check	this box and submit th	nis form to the court with your other	er schedules. Y	ou have nothing else to	o report on this form.	
	_	all of the information b	ŕ		3	•	
Part		Secured Claims	0010111				
			and the second state of th		Column A	Column B	Column C
			nore than one secured claim, list the cr a particular claim, list the other credito		Amount of claim	Value of collateral	Unsecured
mucl	n as possible, lis	t the claims in alphabetic	cal order according to the creditor's nar	me.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	Ditech		Describe the property that secures	the claim:	\$360,547.56	\$563,661.00	\$0.00
	Creditor's Name		88-36 204th Street Hollis, N				
			11423-2206 Queens Count	У			
	PO Box 61	72	As of the date you file, the claim is	: Check all that			
	Rapid City		apply.  Contingent				
		City, State & Zip Code	☐ Unliquidated				
			☐ Disputed				
Who	owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
	ebtor 1 only		☐ An agreement you made (such as car loan)	s mortgage or se	cured		
	ebtor 2 only						
_	ebtor 1 and Deb	•	☐ Statutory lien (such as tax lien, m	echanic's lien)			
		e debtors and another	☐ Judgment lien from a lawsuit	Mortgogo			
	heck if this cla		Other (including a right to offset)	Mortgage			
Date	debt was incu	rred	Last 4 digits of account num	mber <u>6560</u>			
Ad	d the dollar val	ue of your entries in Co	olumn A on this page. Write that nur	mber here:	\$360,54	7.56	
If t	his is the last p	age of your form, add	the dollar value totals from all pages		\$360,54		
Wr	ite that number	r here:			φοσο,σ-ι	11.00	
Part	2: List Oth	ers to Be Notified fo	r a Debt That You Already Liste	d			
tryin than	g to collect from	m you for a debt you o	e notified about your bankruptcy for we to someone else, list the creditor you listed in Part 1, list the addition is page.	r in Part 1, and t	hen list the collection ag	gency here. Similarly, if	you have more
		er, Street, City, State & Z	Zip Code	On whi	ch line in Part 1 did you ei	nter the creditor? 2.1	
	RAS Boris	ants Concourse		l act 4	digits of account number		
	Suite 106			La31 4 1	a.g.to of account number _	<del></del>	
	Westbury	, NY 11590					

Official Form 106D

Fill in this infor	mation to identify your	case:			
Debtor 1	Cheryl M. Brown				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)				☐ Check if the	nis i
				amended	filin

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

- 1. Do any creditors have priority unsecured claims against you?
  - No. Go to Part 2.
  - ☐ Yes.

#### Part 2: List All of Your NONPRIORITY Unsecured Claims

- 3. Do any creditors have nonpriority unsecured claims against you?
  - No. You have nothing to report in this part. Submit this form to the court with your other schedules.
  - ☐ Yes.

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total C	laim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.	Total C	
Total	OI.	Student loans	OI.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	0.00

Official Form 106 E/F

Fill in this infor	rmation to identify your	case:		
Debtor 1	Cheryl M. Brown			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	F NEW YORK	
Case number				
(if known)				

# Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

-	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3	0.1,		<u> </u>	2 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<del>_</del>
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

Fill in this	information to identify your	r case:			
Debtor 1	Cheryl M. Brown	1			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
(Opouse II, IIII	ng) That Name				
United Sta	tes Bankruptcy Court for the:	EASTERN DISTRICT C	OF NEW YORK		
Case num	ber				
(if known)					☐ Check if this is an
					amended filing
O((; -; -	I = 400I I				
	l Form 106H				
Sched	lule H: Your Cod	lebtors			12/15
ill it out, a our name	nd number the entries in the and case number (if known	e boxes on the left. Attach a). Answer every question	n the Additional Page :	to this page. On the top of	led, copy the Additional Page, any Additional Pages, write
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
☐ Yes	3				
Arizon  No.	hin the last 8 years, have yo na, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	a, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ates and territories include
in line Form	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed the c 06G). Use Schedule D, Sch	ith you. List the person shown reditor on Schedule D (Official ledule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor Check all schedules th	or to whom you owe the debt
				Official sofficiales (I)	ar appiy.
3.1				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
=	Number Street				
	City	State	ZIP Code		
3.2				Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to id	dentify your ca	ase:				1				
		Cheryl M. Br									
	btor 2					_					
Uni	ited States Bankruptcy	Court for the	EASTERN DISTRICT	OF NEW YORK							
	se number nown)			-					ed filing ent showi	ing postpetition following date:	
0	fficial Form 1	<u>061</u>					Ī	MM / DD/ Y	YYYY		
S	chedule I: Y	our Inc	ome								12/15
spo atta	use. If you are separa ch a separate sheet t	ated and you to this form. ( Employment	are married and not filir r spouse is not filing w On the top of any additi	ith you, do not incl	ude infor	mati	on abou	t your spo umber (if	ouse. If n known).	nore space is	needed,
	If you have more than one job, attach a separate page with information about additional employers.		■ Employed				■ Empl		ming operate		
			Employment status	_ ` `	☐ Not employed				mployed		
			Occupation	Assistant Bran	Assistant Branch Manager  Municipal Credit Union			Clerk			
	Include part-time, se self-employed work.		Employer's name	Municipal Cred				USPS			
	Occupation may incl or homemaker, if it a		Employer's address	22 Cortlandt S New York, NY							
			How long employed t	here? 2.5 ye	ars			_			
Par	rt 2: Give Detail	ls About Mon	thly Income								
	mate monthly incomuse unless you are sep		ate you file this form. If	you have nothing to	report for	any	line, writ	e \$0 in the	space. I	nclude your noi	n-filing
	ou or your non-filing spe e space, attach a sepa		ore than one employer, co this form.	ombine the informati	ion for all	empl	oyers for	that perso	on on the	lines below. If	you need
							For De	btor 1		ebtor 2 or iling spouse	
2.			ry, and commissions (b calculate what the monthl		2.	\$	4	,187.38	\$	8,312.37	
3.	Estimate and list m	onthly overti	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Inc	ome. Add lir	ne 2 + line 3.		4.	\$	4,1	87.38	\$	8,312.37	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Cheryl M. Brown	_	Case	number (if k	nown)				
				For	Debtor 1			Debtor 2 -filing sp		
	Cop	by line 4 here	4.	\$	4,18	7.38	\$		312.37	-
_					·	-				_
5.		all payroll deductions:	_	•			•			
	5a.	Tax, Medicare, and Social Security deductions	5a.		1,23		\$	2,9	950.06	_
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.	- : -		0.00	\$		0.00	_
	5d.	Required repayments of retirement fund loans	5d.			0.00	\$ 		0.00	_
	5e.	Insurance	5e.	- : -		0.00	\$		0.00	_
	5f.	Domestic support obligations	5f.	\$		0.00	\$		0.00	_
	5g.	Union dues	5g.	\$_		0.00	\$		96.32	_
	5h.	Other deductions. Specify:	5h.	+ \$		0.00	+ \$		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	1,23	3.09	\$	3,0	046.38	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	2,95	4.29	\$	5,2	265.99	_
8.	List 8a.	t all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$		0.00	\$		0.00	
	8b.	Interest and dividends	8b.			0.00	\$—		0.00	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce		· <u>-</u>			·			_
	0-1	settlement, and property settlement.	8c.			0.00	\$		0.00	
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.			0.00	\$		0.00	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:		\$		0.00	\$		0.00	_
	8g.	Pension or retirement income	_ 8g.			0.00	\$		0.00	_
	8h.	Other monthly income. Specify:	8h.	_			+ \$		0.00	_
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		0.00	\$		0.0	0
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2,954.29	+ \$	5.2	65.99	= \$	8,220.28
10.		I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			2,334.23		3,2	03.33	] -	0,220.20
11.										
12.		d the amount in the last column of line 10 to the amount in line 11. The reste that amount on the Summary of Schedules and Statistical Summary of Certainlies							\$Combin	
13.	Do	you expect an increase or decrease within the year after you file this form	?					I	monthi	ly income
		No. Yes. Explain:								
	ш	roo. Explain.								

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:		Ī		
Deb	otor 1 Cheryl M. Brown		Chec	ck if this is:	
	otor 2 puse, if filing)			An amended filing A supplement show 13 expenses as of	ving postpetition chapter
` '	ed States Bankruptcy Court for the: EASTERN DISTRICT OF N	IFW YORK		MM / DD / YYYY	
	· · ·	ILVV TORK		WIWI / DD / TTTT	
	e number nown)				
Of	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married peo ormation. If more space is needed, attach another sheet to nber (if known). Answer every question.				
Part	t 1: Describe Your Household Is this a joint case?				
1.	No. Go to line 2.				
	☐ Yes. Does Debtor 2 live in a separate household?				
	□ No				
	☐ Yes. Debtor 2 must file Official Form 106J-2, Exp	penses for Separate House	ehold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Yes. Fill out this informatio each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
					☐ Yes
					□ No
					☐ Yes
					□ No
3.	Do your expenses include				☐ Yes
Э.	expenses of people other than				
	yourself and your dependents?				
Esti exp	t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unbenses as of a date after the bankruptcy is filed. If this is a blicable date.				
the	lude expenses paid for with non-cash government assistandle value of such assistance and have included it on Scheduficial Form 106l.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.			i	2,066.45
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		100.00
_	4d. Homeowner's association or condominium dues	and house and the trans-	4d. \$		0.00
5.	Additional mortgage payments for your residence, such	as nome equity loans	5. \$		0.00

Cheryl M. Brown	Case number (if known)				
5:					
	6a.	\$	300.00		
	6b.	· ·	100.00		
	6c.	\$	386.00		
		·	0.00		
• • •		·	700.00		
. •		·	0.00		
		·	280.00		
er er e		·			
•		·	90.00		
•	11.	Ψ	50.00		
	12.	\$	240.00		
		·	100.00		
		·	100.00		
<u> </u>	14.	Ψ	100.00		
	15a.	\$	0.00		
		·	0.00		
		·	280.00		
		*			
• •	13u.	Ψ	0.00		
	16.	\$	0.00		
		·	405.00		
• •	17b.	\$	0.00		
Other. Specify:	17c.	\$	0.00		
Other. Specify:	17d.	\$	0.00		
		\$	0.00		
	. 10.	·			
	10	Φ	0.00		
		ur Income			
			0.00		
		·	0.00		
		·	0.00		
			0.00		
		·			
		·	0.00		
Specify:	21.	+\$	0.00		
•					
<u> </u>			5,197.45		
ppy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$			
ld line 22a and 22b. The result is your monthly expenses.		\$	5,197.45		
ate your monthly net income.					
	23a.	\$	8,220.28		
			5,197.45		
	23c.	\$	3,022.83		
nple, do you expect to finish paying for your car loan within the year or do you expect yo			e or decrease because of a		
Explain hara:					
	S: Electricity, heat, natural gas Vater, sewer, garbage collection Felephone, cell phone, Internet, satellite, and cable services Dither. Specify: Ind housekeeping supplies are and children's education costs ag, laundry, and dry cleaning tal care products and services Il and dental expenses Ortation. Include gas, maintenance, bus or train fare. Include car payments. Iniment, clubs, recreation, newspapers, magazines, and books shible contributions and religious donations Include insurance deducted from your pay or included in lines 4 or 20. If insurance Felicle insurance Felicle insurance Felicle insurance. Specify: Do not include taxes deducted from your pay or included in lines 4 or 20. Include insurance to tease payments: Car payments for Vehicle 1 Car payments for Vehicle 1 Car payments for Vehicle 2 Dither. Specify: Dither. Specify: Dayments of alimony, maintenance, and support that you did not report a ded from your pay on line 5, Schedule 1, Your Income (Official Form 1061) Dayments you make to support others who do not live with you. It is real property expenses not included in lines 4 or 5 of this form or on Schoort and the support of	Silectricity, heat, natural gas Galectricity, heat, natural gas Galectricity, heat, natural gas Galectricity, heat, natural gas Galectricity, heat, natural gas Galephone, cell phone, Internet, satellite, and cable services Galephone, cell phone, Internet, satellite, and cable contributions and services Galephone, cell phone, satellite, and cable services Galephone	Silectricity, heat, natural gas Vater, sewer, garbage collection Geb, Selephone, cell phone, Internet, satellite, and cable services Gec. \$ Jither, Specify: Ged, \$ Ind housekeeping supplies Ire and children's education costs I		

Fill in this info	rmation to identify your	case:			
Debtor 1	Cheryl M. Brown				
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)					Check if this is an amended filing
Official For			_		
Declara	ition About a	n Individual	Debtor's Sc	hedules	12/15
	gn Below ay or agree to pay some	one who is NOT an attori	ney to help you fill out b	pankruptcy forms?	
■ No					
☐ Yes.	Name of person				kruptcy Petition Preparer's Notice, , and Signature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sumi	mary and schedules file	d with this declaratio	on and
X /s/ Ch	neryl M. Brown		X		
	yl M. Brown cure of Debtor 1		Signature of	Debtor 2	
Date	January 23, 2018		Date		
•	-				

Official Form 106Dec

Fill in	this inform	ation to identify your	case:			
Debto	r 1	Cheryl M. Brown				
5.1.	•	First Name	Middle Name	Last Name		
Debto (Spouse		First Name	Middle Name	Last Name		
United	States Ban	kruptcy Court for the:	EASTERN DISTRICT OF	NEW YORK		
Cooo	aumhar					
(if knowr	number				_	Check if this is an amended filing
Offic	cial For	m 107				
			Affairs for Individ	duals Filing for B	ankruptcy	4/16
inform	ation. If mo	ore space is needed, ). Answer every ques	attach a separate sheet to	this form. On the top of an	equally responsible for sup y additional pages, write you	
		current marital statu		Lived Belole		
••	nat is your	current maritar statu	3:			
	Married Not marr	ied				
2. Di			lived anywhere other than	where you live now?		
		st o years, have you	iived anywhere other than	where you live now :		
	l No I Voc List	all of the places you li	yed in the last 3 years. Do no	ot include where you live now	,	
_		, ,	·	,		
D	ebtor 1 Prid	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
					ity property state or territor ico, Texas, Washington and V	
	No					
	Yes. Mak	te sure you fill out Sch	edule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explain	the Sources of You	Income			
Fi	ll in the total	amount of income you	received from all jobs and a	g a business during this yould businesses, including parter together, list it only once ur		ndar years?
	l No					
	l Yes. Fill i	n the details.				
			Debtor 1		Debtor 2	
			DEDIOI I			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until for bankruptcy:	Sources of income	(before deductions and		(before deductions

Official Form 107

Debtor 1 Cheryl M. Brown				own		Case number (if known)						
					Debtor 1		Debtor 2					
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)			
			dar year: December	31, 2017 )	■ Wages, commissions, bonuses, tips	\$52,605.00	☐ Wages, combonuses, tips	☐ Wages, commissions, bonuses, tips				
					☐ Operating a business		☐ Operating a	business				
		■ Wages, commissions, bonuses, tips			☐ Wages, commissions, bonuses, tips							
					☐ Operating a business		☐ Operating a	business				
winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.  List each source and the gross income from each source separately. Do not include income that you listed in line 4.  No  Yes. Fill in the details.												
					Dahtand		Dalatan 0					
					Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)			
Pa	rt 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy						
6.	Are □	either No.	Neither De	ebtor 1 nor D primarily for a 90 days befo Go to line 7 List below e paid that cre	each creditor to whom you pai editor. Do not include paymer	Imer debts. Consumer debted purpose."  d you pay any creditor a toted a total of \$6,425* or more the for domestic support obli	al of \$6,425* or mo	ore? yments and th	ne total amount you			
			* Subject		payments to an attorney for the ton 4/01/19 and every 3 years		n or after the date o	of adjustment.				
		Yes.			r both have primarily consure you filed for bankruptcy, di		al of \$600 or more?	?				
			No.	Go to line 7								
			□ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.							
	Cre	ditor'	s Name and	d Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for			

DC	Cheryr W. Brown			C Hamber (# known)						
7.	Within 1 year before you filed for bankruptour Insiders include your relatives; any general particles of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any gen- control, or owner of 20% or	eral partners; partner r more of their voting	erships of which you	ou are a genera iny managing a	al partner; corporation gent, including one fo				
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>	ider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment				
3.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.									
	No No									
	Yes. List all payments to an insider	Data at manner	T-1-1	A	D	41.1				
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name				
Pai	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures								
Э.	Within 1 year before you filed for bankrupte List all such matters, including personal injury modifications, and contract disputes.  ☐ No ☐ Yes. Fill in the details.									
	Case title Case number	Nature of the case	Court or agency		Status of th	e case				
	Ditech Financial LLC against Anthony Sims; Cheryl Sims 717092-2017	foreclosure	Queens Suprei	me Court	Pending On appe Conclude					
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below.  No. Go to line 11.  Yes. Fill in the information below.		rty repossessed, f	oreclosed, garni	shed, attached	I, seized, or levied?				
	Creditor Name and Address	Describe the Property		Date		Value of the				
		Explain what happened	I			property				
11.	<ul> <li>Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?</li> <li>No</li> <li>Yes. Fill in the details.</li> </ul>									
	Creditor Name and Address Describe the action the creditor took					Amount				
2.	Within 1 year before you filed for bankruptocourt-appointed receiver, a custodian, or a  No Yes		rty in the possess	take		efit of creditors, a				

Deb	btor 1 Cheryl M. Brown		Case number (if known)						
Par	rt 5: List Certain Gifts and Contribution	ons							
13.	Within 2 years before you filed for ban  ■ No □ Yes. Fill in the details for each gift.	kruptcy,	did you give any gifts with a total value of more t	han \$600 per person?	?				
	Gifts with a total value of more than \$ per person  Person to Whom You Gave the Gift ar		Describe the gifts	Dates you gave the gifts	Value				
	Address:	iu							
14.	Within 2 years before you filed for ban ■ No □ Yes. Fill in the details for each gift o		did you give any gifts or contributions with a tota	ıl value of more than	\$600 to any charity?				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.	total	Describe what you contributed	Dates you contributed	Value				
Par	rt 6: List Certain Losses								
15.	Within 1 year before you filed for bank or gambling?	ruptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,				
	■ No □ Yes. Fill in the details.								
	Describe the property you lost and how the loss occurred	Include	ibe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
Par	rt 7: List Certain Payments or Transfe	ers							
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?  Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.  Person Who Was Paid  Address  Email or website address  Person Who Made the Payment, if No	t You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 info@pankinlaw.com		Attorney Fees	10/2017	\$3,500.00				
17.		editors o	id you or anyone else acting on your behalf pay or to make payments to your creditors? ted on line 16.	or transfer any prope	rty to anyone who				
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

Debtor 1 Cheryl M. Brown

Case number (if known)

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not									
	include gifts and transfers that you have already listed on this statement.  No									
		Yes. Fill in the details.								
		son Who Received Transfer dress	Description and very property transfer		payme	ibe any property or ents received or debts n exchange	Date transfer was made			
	Per	son's relationship to you			<b>P</b>	· cachange				
19.		in 10 years before you filed for bankrup eficiary? (These are often called asset-pro No		ny property to a	self-settle	d trust or similar device o	of which you are a			
	Nan	ne of trust	Description and	Description and value of the property transferred						
		List of Certain Financial Accounts, In	•	,	•					
20.	sold Inclu	iin 1 year before you filed for bankrupto , moved, or transferred? ude checking, savings, money market, o	or other financial accou	nts; certificates	of deposit		, ,			
		ses, pension funds, cooperatives, asso No	ciations, and other fina	ncial institution	S.					
		Yes. Fill in the details.		_						
		ne of Financial Institution and dress (Number, Street, City, State and ZIP a)	Last 4 digits of account number	Type of account instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer			
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
		No Yes. Fill in the details.								
		ne of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?			
22.	Have	e you stored property in a storage unit	or place other than you	r home within 1	year befor	e you filed for bankruptc	y?			
		No Yes. Fill in the details.								
		ne of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?			
Par	t 9:	Identify Property You Hold or Control	I for Someone Else							
23.										
		No Yes. Fill in the details.								
		ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value			
Par	t 10:	Give Details About Environmental Inf	ormation							

For the purpose of Part 10, the following definitions apply:

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5 Debtor 1 Cheryl M. Brown

Case number (if known)

	toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.						
	Site means any location, facility, or property to own, operate, or utilize it, including dispo		aw, whether you now own, operate,	or utilize it or used			
	Hazardous material means anything an envi hazardous material, pollutant, contaminant,		waste, hazardous substance, toxic s	substance,			
Rep	ort all notices, releases, and proceedings tha	t you know about, regardless of when	they occurred.				
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or in violation of an environme	ental law?			
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
25.							
	■ No □ Yes. Fill in the details.						
26	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice			
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlement							
	■ No □ Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case			
Par	111: Give Details About Your Business or C	Connections to Any Business					
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the following connections to any	/ business?			
	☐ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-time or part-time				
	☐ A member of a limited liability compa	any (LLC) or limited liability partnersh	ip (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing exe	ecutive of a corporation					
	☐ An owner of at least 5% of the voting	or equity securities of a corporation					
	■ No. None of the above applies. Go to P	art 12.					
	Yes. Check all that apply above and fill		s.				
	Business Name	Describe the nature of the business	Employer Identification numbe				
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security  Dates business existed	number or ITIN.			
28.	Within 2 years before you filed for bankrupto institutions, creditors, or other parties.	cy, did you give a financial statement t	to anyone about your business? Inclu	ude all financial			
	■ No □ Yes. Fill in the details below.						
	Name Date Issued Address (Number Street City State and 7/B Code)						
	(Number, Street, City, State and ZIP Code)						

Cheryl M. Brown		Case number (if known)				
Part 12: Sign Below						
	king a false statement, concealing p	ments, and I declare under penalty of perjury that the answers roperty, or obtaining money or property by fraud in connection r up to 20 years, or both.				
/s/ Cheryl M. Brown						
Cheryl M. Brown Signature of Debtor 1	Signature of Debtor	2				
Date January 23, 2018	Date					
Did you attach additional pages to Your S  ■ No □ Yes	tatement of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?				
Did you pay or agree to pay someone who ■ No	is not an attorney to help you fill o	ut bankruptcy forms?				
$\square$ Yes. Name of Person Attach the	Bankruptcy Petition Preparer's Notice,	Declaration, and Signature (Official Form 119).				

Fill in this information to identify your case:				
Debtor 1	Cheryl M. Brown			
Debtor 2 (Spouse, if filing)				
United States Bankruptcy Court for the: Eastern District of New York				
Case number (if known)				

Check as directed in lines 17 and 21:					
	According to the calculations required by this Statement:				
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).				
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).				
	3. The commitment period is 3 years.				
	4. The commitment period is 5 years.				

☐ Check if this is an amended filing

## Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only. □ Not married. Fill out Column A, lines 2-11. ■ Married. Fill out both Columns A and B. lines 2-11. Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space. Column A Column B Debtor 1 Debtor 2 or non-filing spouse 2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all 4,553.17 7,506.35 payroll deductions). Alimony and maintenance payments. Do not include payments from a spouse if 0.00 0.00 Column B is filled in. 4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments 0.00 0.00 you listed on line 3. 5. Net income from operating a business, Debtor 1 profession, or farm \$ 0.00 Gross receipts (before all deductions) 0.00 Ordinary and necessary operating expenses 0.00 Copy here -> \$ 0.00 0.00 Net monthly income from a business, profession, or farm \$ 6. Net income from rental and other real property Debtor 1 0.00 \$ Gross receipts (before all deductions) -\$ 0.00 Ordinary and necessary operating expenses 0.00 0.00 Copy here -> \$ 0.00 \$ Net monthly income from rental or other real property

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case number (if known)

						Column A Debtor 1		Column B Debtor 2 o	or	
7.	Intere	st, dividends, and royalties				\$	0.00	Φ.	0.00	
		ployment compensation				\$	0.00	\$	0.00	
		enter the amount if you conter cial Security Act. Instead, list it		d was a benefit u	ınder					
		you		0.00	_					
	For	your spouse	\$	0.00	_					
9.		on or retirement income. Do runder the Social Security Act.	not include any amount rec	eived that was a		\$	0.00	\$	0.00	
10.	Do not receive	e from all other sources not include any benefits received as a victim of a war crime, a tic terrorism. If necessary, list celow.	under the Social Security A crime against humanity, or	Act or payments r international or						
					_	\$	0.00	\$	0.00	
					_	\$	0.00	\$	0.00	
		Total amounts from separate	pages, if any.		+	\$	0.00	\$	0.00	
11.	Calcul each c	ate your total average month olumn. Then add the total for C	ly income. Add lines 2 threstolumn A to the total for Co	ough 10 for lumn B.		4,553.17	+ \$	7,506.35	=[\$_	12,059.52
12.	Сору	pour total average monthly in late the marital adjustment. O	come from line 11.						\$	12,059.52
10.	_	ou are not married. Fill in 0 bel								
	_	ou are married and your spous		below.						
	<b>■</b> Y	ou are married and your spous	e is not filing with you.							
	F	ill in the amount of the income ependents, such as payment or	isted in line 11, Column B,							
		elow, specify the basis for excliding distinct excliding the specific page.		amount of incom	e dev	oted to each	h purpos	se. If necessary	y, list addi	tional
	If	this adjustment does not apply	, enter 0 below.							
					\$		_			
					Ψ \$					
					Ψ <u> </u>					
		Total		\$		0.0	0	Copy here=>		0.00
14.	Your	current monthly income. Su	btract line 13 from line 12.						\$	12,059.52
15.	Calc	ulate your current monthly in	come for the year. Follow	these steps:						40.050.50
	15a.	Copy line 14 here=>							\$	12,059.52
		Multiply line 15a by 12 (the nu	mber of months in a year).						X	12
	15b.	The result is your current mor	thly income for the year for	r this part of the	form.				\$1	44,714.24

Cheryl M. Brown

Debtor 1

16a. Fill in the state in which you live.  16b. Fill in the number of people in your household.  2 16c. Fill in the median family income for your state and size of household.  To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankingtopy delik s office.  17. How do the lines compare?  17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 17 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable income (Official Form 122C-2).  17b. Line 15b is smore than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.  2art 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)  17c. Copy your total average monthly income from line 11.  2 12,059.52  2art 17c. Copy your total average monthly income from line 11.  2 12,059.52  2 12,059.52  2 12,059.52  2 12,059.52  2 2 2 2 2 3 2 3 2 3 3 3 3 3 3 3 3 3 3	Debte	or 1	Cheryl M. Brown		Case number (if known)	
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	Par	t 4:	Sign Below			
X /s/ Chervl M. Brown		By s	igning here, under penalty of perjury I declare that	the information on the	s statement and in any attachments is tru	e and correct.
	>	<b>(</b> /s/	Cheryl M. Brown			
Cheryl M. Brown Signature of Debtor 1						
Date January 23, 2018			January 23, 2018			
MM / DD / YYYY  If you checked 17a, do NOT fill out or file Form 133C 3		lt				
If you checked 17a, do NOT fill out or file Form 122C-2.  If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.		-			of that form, copy your current monthly in	come from line 14 above

Fill in	this information to identify your case:					
Debtor	1 Cheryl M. Brown					
	Onory: In: Brown	-				
Debtor		_				
(Spous	e, if filing)					
United	States Bankruptcy Court for the: Eastern District of New York	_				
Case n	umber					
(if knov		☐ Check if	this is an amended filing			
Official	Form 122C-2					
	pter 13 Calculation of Your Disposable	Income	04/16			
To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).  See as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any						
Part 1:	nal pages, write your name and case number (if known).  Calculate Your Deductions from Your Income					
the	Internal Revenue Service (IRS) issues National and Local Standards questions in lines 6-15. To find the IRS standards, go online using the rmation may also be available at the bankruptcy clerk's office.					
expe	uct the expense amounts set out in lines 6-15 regardless of your actual exercises if they are higher than the standards. Do not include any operating C-1, and do not deduct any amounts that you subtracted from your spous	expenses that you subtracted from	income in lines 5 and 6 of Form			
If yo	ur expenses differ from month to month, enter the average expense.					
Note	e: Line numbers 1-4 are not used in this form. These numbers apply to info	ormation required by a similar form	used in chapter 7 cases.			
5.	The number of people used in determining your deductions from in	come				
	Fill in the number of people who could be claimed as exemptions on you plus the number of any additional dependents whom you support. This n the number of people in your household.		2			
Nati	onal Standards You must use the IRS National Standards to an	nswer the questions in lines 6-7.				
6.	<b>Food, clothing, and other items:</b> Using the number of people you ente Standards, fill in the dollar amount for food, clothing, and other items.	red in line 5 and the IRS National	\$1,132.00			
7.	<b>Out-of-pocket health care allowance:</b> Using the number of people you the dollar amount for out-of-pocket health care. The number of people is people who are 65 or olderbecause older people have a higher IRS allowable than this IRS amount, you may deduct the additional amount on li	split into two categoriespeople wowance for health car costs. If your	ho are under 65 and			

Official Form 22C-2

otor 1	Cheryi W. Brown		_	Case number (if i	known)		
People v	who are under 65 years of age						
7a.	Out-of-pocket health care allowance per person	\$	49				
7b.	Number of people who are under 65	X	2				
7c.	Subtotal. Multiply line 7a by line 7b.	\$	98.00	Copy here=>	> \$	98.00	
People v	who are 65 years of age or older						
7d.	Out-of-pocket health care allowance per person	\$	117				
7e.	Number of people who are 65 or older	Χ	0				
7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00	Copy here=>	> \$	0.00	
7g.	Total. Add line 7c and line 7f		\$	98.00	Сору	total here=> \$	98.00
						L	
	tandards You must use the IRS Local Standards to						
	on information from the IRS, the U.S. Trustee Prog otcy purposes into two parts:	gram has div	vided the IRS	Local Standard	d for hous	ng for	
Hous	sing and utilities - Insurance and operating expen	ses					
Hous	sing and utilities - Mortgage or rent expenses						
	ver the questions in lines 8-9, use the U.S. Truste					the link spe	cified in the
B. Ho	e instructions for this form. This chart may also busing and utilities - Insurance and operating expense dollar amount listed for your county for insurance	enses: Using	the number			e 5, fill \$	699.0
	using and utilities - Mortgage or rent expenses:	and operation	у охроносо.				
	Using the number of people you entered in line 5, f listed for your county for mortgage or rent expense		ar amount		\$1	,964.00	
9b.	Total average monthly payment for all mortgages a	and other deb	ots secured by	vour home.			
	To calculate the total average monthly payment, accontractually due to each secured creditor in the 60	dd all amount	ts that are	, ,			
	for bankruptcy. Next divide by 60.						
	Name of the creditor	Avera paym	ige monthly ent				
	Ditech	\$	2,066.4	5			
	9b. Total average monthly paymer	nt \$	2,066.45	Copy here=>	-\$		epeat this amou line 33a.
9c.	Net mortgage or rent expense.						
	Subtract line 9b (total average monthly payment) fror rent expense). If this number is less than \$0, ent	,	mortgage	\$	0.00	Copy here=> \$	0.0
	ou claim that the U.S. Trustee Program's division ects the calculation of your monthly expenses, fil				is incorrec	t and \$	0.0
E	xplain why:						

Debtor 1	Cher	yl M. Brown		Case number (if known)
11.	Local tra	ansportation expenses: Check the number of vehicle	cles for which you clain	m an ownership or operating expense.
	■ 0. Go	to line 14.		
	□ 1. Go	to line 12.		
	□ 2 or n	nore. Go to line 12.		
12.		operation expense: Using the IRS Local Standards gexpenses, fill in the Operating Costs that apply for		
13.	You may			the net ownership or lease expense for each vehicle below. the vehicle. In addition, you may not claim the expense for
Vel	hicle 1	Describe Vehicle 1:		
13a.	Ownersh	ip or leasing costs using IRS Local Standard		\$ 0.00
13b.	Average	monthly payment for all debts secured by Vehicle 1		
	Do not in	clude costs for leased vehicles.		
	are contr	ate the average monthly payment here and on line actually due to each secured creditor in the 60 mon cy. Then divide by 60.		hat
	Nar	ne of each creditor for Vehicle 1	Average monthly payment	
			\$	
		Total Average Monthly Payment	\$	Copy here => -\$  0.00 Repeat this amount on line 33b.
13c.	Net Vehi	cle 1 ownership or lease expense		Copy net
		line 13b from line 13a. if this number is less than \$0	), enter \$0	\$ 0.00   Vehicle 1   expense here   => \$ 0.00
Vel	hicle 2	Describe Vehicle 2:		
13d.	Ownersh	ip or leasing costs using IRS Local Standard		\$ 0.00
13e.	Average leased v	monthly payment for all debts secured by Vehicle 2 ehicles.	. Do not include costs	for
	Nar	ne of each creditor for Vehicle 2	Average monthly payment	
			\$	_
				Copy Repeat this
		Total average monthly payment	\$	here amount on line 33c.
13f.	Net Vehi	cle 2 ownership or lease expense		Copy net
	Subtract	line 13e from line 13d. if this number is less than \$0	), enter \$0	\$ 0.00   Vehicle 2   expense here
14.		ansportation expense: If you claimed 0 vehicles ransportation expense allowance regardless of		
15.	Addition also ded	nal public transportation expense: If you claimed uct a public transportation expense, you may fill in wormer than the IRS Local Standard for <i>Public Trans</i>	1 or more vehicles in li	ine 11 and if you claim that you may

Case number (if known)

Other Necessary Expenses In addition to the expense deductions listed the following IRS categories.	above, you are allowed your monthly expenses for
16. <b>Taxes:</b> The total monthly amount that you will actually pay for federal, st self-employment taxes, social security taxes, and Medicare taxes. You n your pay for these taxes. However, if you expect to receive a tax refund, and subtract that number from the total monthly amount that is withheld.	nay include the monthly amount withheld from you must divide the expected refund by 12
Do not include real estate, sales, or use taxes.	\$ 3,937.13
17. <b>Involuntary deductions:</b> The total monthly payroll deductions that your contributions, union dues, and uniform costs.	
Do not include amounts that are not required by your job, such as volunt	ary 401(k) contributions or payroll savings. \$
18. Life Insurance: The total monthly premiums that you pay for your own tilling together, include payments that you make for your spouse's term lip Do not include premiums for life insurance on your dependents, for a not of life insurance other than term.	e insurance.
19. Court-ordered payments: The total monthly amount that you pay as re	quired by the order of a court or
administrative agency, such as spousal or child support payments.  Do not include payments on past due obligations for spousal or child sup	oport. You will list these obligations in line 35. \$
20. Education: The total monthly amount that you pay for education that is	either required:
as a condition for your job, or	
for your physically or mentally challenged dependent child if no public	education is available for similar services.
21. <b>Childcare:</b> The total monthly amount that you pay for childcare, such as Do not include payments for any elementary or secondary school educa	
22. Additional health care expenses, excluding insurance costs: The m	
that is required for the health and welfare of you or your dependents and by a health savings account. Include only the amount that is more than t Payments for health insurance or health savings accounts should be list	he total entered in line 7.
23. Optional telephone and telephone services: The total monthly amount	·
for you and your dependents, such as pagers, call waiting, caller identific phone service, to the extent necessary for your health and welfare or that income, if it is not reimbursed by your employer.	cation, special long distance, or business cell
Do not include payments for basic home telephone, internet and cell phoexpenses, such as those reported on line 5 of Official Form 122C-1, or a	
expenses, such as those reported on line 3 of Official Form 1220-1, of a	my amount you previously deducted.
24. Add all of the expenses allowed under the IRS expense allowances Add lines 6 through 23.	\$ 6,151.45
Additional Expense Deductions These are additional deductions allowe Note: Do not include any expense allow	
<ol> <li>Health insurance, disability insurance, and health savings account insurance, disability insurance, and health savings accounts that are rea your dependents.</li> </ol>	
Health insurance \$ 0.	00
·	00
Health savings account +\$ 0.	
	.00 Copy total here=> \$ 0.00
Total \$	.00 Copy total here=> \$ 0.00
Do you actually spend this total amount?  No. How much do you actually spend?	
Yes \$	
26. Continued contributions to the care of household or family member continue to pay for the reasonable and necessary care and support of anyour household or member of your immediate family who is unable to page 1.	n elderly, chronically ill, or disabled member of
include contributions to an account of a qualified ABLE program. 26 U.S	C. § 529A(b) \$ 0.00
27. <b>Protection against family violence.</b> The reasonably necessary monthly safety of you and your family under the Family Violence Prevention and	Services Act or other federal laws that apply.
By law, the court must keep the nature of these expenses confidential.	\$

Cheryl M. Brown

Debtor 1

btor 1	Cheryl M. Brown	Case number (if known)			
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and operating expenses o	n		
	If you believe that you have home energy c 8, then fill in the excess amount of home er	costs that are more than the home energy costs included in expenses on nergy costs	line		
	You must give your case trustee documents amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the additional ary.		\$	0.00
		dren who are younger than 18. The monthly expenses (not more than expendent children who are younger than 18 years old to attend a private of	or		
	You must give your case trustee documental claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the amount not already accounted for in lines 6-23.			
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after the date of adjustment.		\$	0.00
		he monthly amount by which your actual food and clothing expenses are gallowances in the IRS National Standards. That amount cannot be more s in the IRS National Standards.			
		ional allowance, go online using the link specified in the separate so be available at the bankruptcy clerk's office.			
	You must show that the additional amount of	claimed is reasonable and necessary.		\$	0.00
	Continuing charitable contributions. The instruments to a religious or charitable orga	e amount that you will continue to contribute in the form of cash or financianization. 11 U.S.C. § 548(d)(3) and (4).	al		
	Do not include any amount more than 15%	of your gross monthly income.		\$	0.00
	Add all of the additional expense deduct Add lines 25 through 31.	tions.		\$	0.00
Dedu	uctions for Debt Payment				
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortgages, vehicle 33a through 33e.			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to each secured nkruptcy. Then divide by 60.			
	Mortgages on your home			verage aymen	e monthly
33a.	Copy line 9b here	=>	•	ayınıcı	2,066.45
	Loans on your first two vehicles				
33b.	Conviling 12h hara	=>	. \$		0.00
33c.			\$		0.00
		=>	,		
33d. Name	List other secured debts: e of each creditor for other secured debt	Identify property that secures the debt  Does payment include taxes or insurance?			
		□ No			
	-NONE-	☐ Yes	\$		
			Ψ		
		□ No			
			\$		
		□ No			
		□ Yes +	\$		
			Ψ		
33e	Total average monthly payment. Add lines	2066 45 to	opy tal ere=>	\$	2,066.45

btor 1 Ch	eryl M. Brown			Case	number ( <i>if known</i> )		
	y debts that you listed in lir er property necessary for yo						
□ No	. Go to line 35.						
■ Ye	s. State any amount that you listed in line 33, to keep po Next, divide by 60 and fill	ossession of your property					
Name of the	he creditor	Identify property that se	cures the debt	٦	otal cure amount	Month	nly cure
Ditech		88-36 204th Street 11423-2206 Queer	,	\$	46,831.40		780.52
				\$		÷ 60 = \$	
						Copy	
				Total	780.52	here=> \$	780.52
36 <b>Projec</b>		due priority claims					0.00
	. Go to line 36. s. Fill in the total amount of a			current or			
	0 0,	•		\$	0.00	÷60 \$	0.00
36. <b>Projec</b>	ted monthly Chapter 13 pla	n payment		\$	925.00	_	
Office of the Exe	t multiplier for your district as of the United States Courts (for ecutive Office for United State a list of district multipliers that incle e instructions for this form. This lis	or districts in Alabama and s Trustees (for all other di udes your district, go online u	Y North Carolina stricts). sing the link speci	i) or by X ified in the	7.40		
Averag	ge monthly administrative exp	ense			\$68.45	Copy total here=> \$	68.45
	all of the deductions for debines 33e through 36.	t payment.				\$_	2,915.42
Total Ded	uctions from Income						
38. <b>Add al</b>	I of the allowed deductions						
, ,	line 24, All of the expenses anse allowances	llowed under IRS	\$	6,151.45			
Сору	line 32, All of the additional e			0.00			
Сору	line 37, All of the deductions	for debt payment	+\$	2,915.42			
Total	deductions		\$	9,066.87	Copy total here=>	<b>&gt;</b> \$	9,066.87
					1		

ebtor 1	tor 1 Cheryl M. Brown					numb	per (if known)		
art 2:	Dete	rmine You	r Disposable Income Under 11	U.S.C. § 1325(b)	(2)				
			ent monthly income from line Current Monthly Income and Ca					\$	12,059.52
<b>ch</b> dis red	<b>ildren.</b> sability p ceived in	The monthly ayments for accordance	ly necessary income you recei y average of any child support pa or a dependent child, reported in lace with applicable nonbankruptcy anded for such child.	ayments, foster ca Part I of Form 122	are payments, or !C-1, that you	\$	0	.00	
en in	nployer v 11 U.S.0	withheld fro C. § 541(b)(	etirement deductions. The mont m wages as contributions for qua (7) plus all required repayments of § 362(b)(19).	alified retirement p	lans, as specified	\$	0	.00	
42. <b>To</b>	tal of al	I deduction	ns allowed under 11 U.S.C. § 7	<b>07(b)(2)(A).</b> Copy	line 38 here=>	\$	9,066	.87	
ex the	penses a	and you ha nses. You n	al circumstances. If special circ ve no reasonable alternative, de nust give your case trustee a det ocumentation for the expenses.	scribe the special	circumstances and	l			
Descr	ibe the	special cir	cumstances		Amount of exper	nse			
					<b></b>				
				Total \$_	0.00	Cop	oy e=> \$	0.00	
44. <b>T</b> o	otal adju	ıstments. A	Add lines 40 through 43.		=>  \$		9,066.87	Copy here=> -\$	9,066.87
45. <b>C</b> a			thly disposable income under to	§ 1325(b)(2). Sub	tract line 44 from lir	ne 39	1.	\$	2,992.65
ha tim yo	ive chan ne your o u filed yo	ged or are case will be our petition.	r expenses. If the income in For virtually certain to change after the open, fill in the information below, check 122C-1 in the first column when the increase occurred, a	ne date you filed y w. For example, if n, enter line 2 in tl	our bankruptcy pet the wages reported ne second column,	ition d inci	and during the reased after		
Form	1	Line	Reason for change		Date of change		Increase or decrease?	Amount of c	hange
☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122 ☐ 122	2C-2 _ 2C-1 2C-2 _ 2C-1					-	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Decrease	\$ \$	

Debtor 1	Cheryl M. Brown	Case number (if known)
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you dec	lare that the information on this statement and in any attachments is true and correct.
	/s/ Cheryl M. Brown	, and the second
^.	Cheryl M. Brown Signature of Debtor 1	
	January 23, 2018 MM / DD / YYYY	

Official Form 122C-2

Debtor 1	Cheryl M. Brown	Case number (if known)
Deptor 1	Cheryi W. Brown	Case number (If known)

### **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 07/01/2017 to 12/31/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **MCU** Year-to-Date Income:

Starting Year-to-Date Income: \$25,286.07 from check dated 6/30/2017. Ending Year-to-Date Income: \$52,605.09 from check dated 12/31/2017.

Income for six-month period (Ending-Starting): \$27,319.02.

Average Monthly Income: \$4,553.17.

Debtor 1 Cheryl M. Brown	Case number (if known)	
--------------------------	------------------------	--

### **Current Monthly Income Details for the Debtor's Spouse**

**Spouse Income Details:** 

Income for the Period **07/01/2017** to **12/31/2017**.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **USPS** Year-to-Date Income:

Starting Year-to-Date Income: \$38,246.71 from check dated 6/30/2017. Ending Year-to-Date Income: \$83,284.81 from check dated 12/31/2017.

Income for six-month period (Ending-Starting): **\$45,038.10**.

Average Monthly Income: \$7,506.35.

B2030 (Form 2030) (12/15)

# **United States Bankruptcy Court** Eastern District of New York

In re	Cheryl M. Brown		Case N	· O.	
		Debtor(s)	Chapte	r <b>13</b>	
	DISCLOSURE OF COMPEN	NSATION OF ATTO	RNEY FOR	DEBTOR(S)	
cc	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filinger rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be p	aid to me, for services rene	dered or to
	For legal services, I have agreed to accept		\$	3,500.00	
	Prior to the filing of this statement I have received		\$	3,500.00	
	Balance Due		\$	0.00	
2. T	he source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. T	he source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. <b>•</b>	I have not agreed to share the above-disclosed compe	ensation with any other persor	unless they are m	embers and associates of r	ny law firm.
5. II a. b. c.	I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name return for the above-disclosed fee, I have agreed to reach Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed]	nes of the people sharing in the nder legal service for all aspecting advice to the debtor in de ement of affairs and plan whice	e compensation is ets of the bankrupto termining whether h may be required	attached.  by case, including:  to file a petition in bankru	
6. B	y agreement with the debtor(s), the above-disclosed fee  The above fee does not include represer or any contested matters, adjournments appearance of the debtor, investigations debtors in any dischargeability actions, proceeding and preparation and filing of  The above fee also does not include the credit report.	ntation in any advesary properties of the 341a creditors med for audits conducted by founding lien avoidances, it any reaffirmation agreen	oceedings eting due to nor the U.S. Trustee relief from stay nents.	's Office, representation actions or any other ac	dversary
	стешттерот.	CEDTIFICATION			
	certify that the foregoing is a complete statement of any nkruptcy proceeding.	CERTIFICATION  agreement or arrangement for	or payment to me for	or representation of the del	btor(s) in
Ja	nuary 23, 2018	/s/ DAVID I. PAN			
Da	te	<b>DAVID I. PANKIN</b> Signature of Attorn	•		
		David I. Pankin,	P.C.		
		48 Willoughby S Brooklyn, NY 11			
		718-243-2444 F		4	
		info@pankinlaw			
		Name of law firm			

# **United States Bankruptcy Court Eastern District of New York**

In re	Cheryl M. Brown		Case No.	
		Debtor(s)	Chapter	13

# **VERIFICATION OF CREDITOR MATRIX**

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

Date: January 23, 2018

/s/ Cheryl M. Brown
Cheryl M. Brown
Signature of Debtor

Date: January 23, 2018

/s/ DAVID I. PANKIN, ESQ.
Signature of Attorney
DAVID I. PANKIN, ESQ.

DAVID I. PANKIN, ESQ.
David I. Pankin, P.C.
48 Willoughby Street
Brooklyn, NY 11201-5202
718-243-2444 Fax: 718-243-1144

USBC-44

Rev. 9/17/98

Ditech PO Box 6172 Rapid City SD 57709

RAS Boriskin LLC 900 Merchants Concourse Suite 106 Westbury NY 11590

### UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

# STATEMENT PURSUANT TO LOCAL **BANKRUPTCY RULE 1073-2(b)**

<b>DEBTOR(S):</b>	Cheryl M. Brown	CASE NO.:.	
	Local Bankruptcy Rule 1073-2(b), the debtor Cases, to the petitioner's best knowledge, information	(or any other petitioner) hereby makes the following mation and belief:	g disclosure
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before the filing of the res; (iii) are affiliates, as defined in 11 U.S.C. § or more of its general partners; (vi) are partner	D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the new petition, and the debtors in such cases: (i) are the same partner in the same partner ships which share one or more common general partner ated Cases had, an interest in property that was or is	he same; (ii) are rship; (v) are a tners; or (vii)
NO RELATED	CASE IS PENDING OR HAS BEEN PENDIN	G AT ANY TIME.	
☐ THE FOLLOW!	ING RELATED CASE(S) IS PENDING OR H	AS BEEN PENDING:	
1. CASE NO.:	JUDGE: DISTRICT/DIVISION:_		
CASE STILL PENI	DING (Y/N): [If closed] Da	ate of closing:	
CURRENT STATI	US OF RELATED CASE:		
	(Discharg	ed/awaiting discharge, confirmed, dismissed, etc.)	
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE	above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("R F RELATED CASE:	EAL PROPERTY") WHICH WAS ALSO LISTED	IN
2. CASE NO.:	JUDGE: DISTRICT/DIVISION:		
CASE STILL PENI	DING (Y/N): [If closed] Da	ate of closing:	
CURRENT STATI	US OF RELATED CASE:(Discharg	ed/awaiting discharge, confirmed, dismissed, etc.)	
MANNER IN WH	ICH CASES ARE RELATED (Refer to NOTE	above):	
	LISTED IN DEBTOR'S SCHEDULE "A" ("R F RELATED CASE:	EAL PROPERTY") WHICH WAS ALSO LISTED	IN
3. CASE NO.:	JUDGE: DISTRICT/DIVISION:		
CASE STILL PENI	DING (Y/N): [If closed] Da	ate of closing:	

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE:	
(Dischar	ged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE	E above):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("SCHEDULE "A" OF RELATED CASE:	REAL PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE</i> : Pursuant to 11 U.S.C. § 109(g), certain individuals who h be eligible to be debtors. Such an individual will be required to f	ave had prior cases dismissed within the preceding 180 days may not ile a statement in support of his/her eligibility to file.
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORN	EY, AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/	N): <u>Y</u>
CERTIFICATION (to be signed by pro se debtor/petitioner or de	btor/petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy case as indicated elsewhere on this form.	is not related to any case now pending or pending at any time, except
/s/ DAVID I. PANKIN, ESQ.	
DAVID I. PANKIN, ESQ. Signature of Debtor's Attorney David I. Pankin, P.C. 48 Willoughby Street Brooklyn, NY 11201-5202 718-243-2444 Fax:718-243-1144	Signature of Pro Se Debtor/Petitioner
	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17 Rev.8/11/2009